PTO/SB/17 (10-08)
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9 / 5/140/ 1/10 / 1	POTITION ATTENDED							
X Effective on 12/08/2004.				Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Number 1		10/828,500-Conf. #4294		
FEE TRANSMITTAL				Filing Date		April 21, 2004		
For FY 2009			First Named Inv	rentor	John D. Robinson			
F01 F1 2003				Examiner Name H. A. El Cha			nti	
X Applicant claims small entity stat		us. See 37 CFR 1.27		Alt Olik –		2157		
TOTAL AMOUNT OF PAYMENT		(\$) 825.00		Attorney Docket No. AS		AST-0001		
METHOD OF	PAYMENT (check	all that apply)						
Check	Credit Card	Money Order	No		please identi	-		
X Deposit Ac	count Deposit Account	Number: 18-	-0013	Deposit	Account Nam	e: Rader, Fish	man & Grau	er PLLC
For the	above-identified depo	sit account, the D	Director is	hereby authorize	ed to: (che	ck all that apply	<b>'</b> )	
x C	harge fee(s) indicated	i below		Charg	e fee(s) in	dicated below,	except for th	e filing fee
	harge any additional i e(s) under 37 CFR 1.		ments o	f x Credit	any overp	ayments		
FEE CALCU	LATION				•			
1. BASIC FILIN	G, SEARCH, AND E	XAMINATION FE	ES					
	FI	LING FEES	SE	ARCH FEES	EXAMII	NATION FEE	S	
Application T	ype Fee (\$	Small Entity ) Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)
Utility	330	165	540	270	220	110		
Design	220	110	100	50	140	70		
Plant	220	110	330	165	170	85		
Reissue	330	165	540	270	650	325		
Provisional	220	110	0	0	0	0		
2. EXCESS CL	AIM FEES						5	Small Entity
Fee Description Each claim over 20 (including Reissues)							<u>Fee (\$)</u> 52	Fee (\$) 26
Each independent claim over 3 (including Reissues)							220	110
Multiple dependent claims							390	195
Total Claims Extra Claim		Fee (\$) F		ee Paid (\$)		/lultiple Depen	dent Claims	
	- or HP =	_ x =			<u>F</u>	ee (\$)	Fee Paid (\$)	
HP = highest number of total claims paid fo Indep. Claims Extra Claim		•		ee Paid (\$)				_
	- or HP =	x =						
	ber of independent claims	paid for, if greater tha	an 3.					
listings und	ON SIZE FEE ation and drawings eder 37 CFR 1.52(e)), raction thereof. See 3	the application size	ze fee dı	ie is \$270 (\$135 f	onically fi for small e	iled sequence o entity) for each	r computer additional 50	
Total Sheet				dditional 50 or frac	ction there	of Fee (\$)	Fee P	aid (\$)
	- 100 =	/50 =		(round up to a who	ole number)	x	=	
4. OTHER FEE	(S)						Fees F	Paid (\$)
Non-English	Specification, \$13	0 fee (no small en	tity disc	ount)		Ŀ	cci	- 00
Other (e.g.,	sponse within third month			555.00 270.00				
SUBMITTED BY		2401 Notice of						
Signature	-11			Registration No.	40,290	Telephone	(202) 055	3750
		(Alleria)/Ageik)			(202) 955-3750			
Name (Print/Type)	Christopher M. To	חומכ				Date	December 1	19, 2008